

# City of Falls Church Motor Vehicle Registration Form

\* denotes required information needed to complete this form. Form is available on the City's website at: [www.fallschurchva.gov](http://www.fallschurchva.gov) under "Services"; "Vehicle Registration"

**\*1<sup>st</sup> Vehicle Owner's Full Name:** \_\_\_\_\_  
(Print names as they appear on the DMV registration card, last name first, first name second, middle name last. Contact COR or DMV to update your address)

**\*1<sup>st</sup> Vehicle Owner's Social Security Number:** \_\_\_\_\_

**\*2<sup>nd</sup> Vehicle Owner's Full Name:** \_\_\_\_\_  
(if jointly owned)

**\*2<sup>nd</sup> Vehicle Owner's Social Security Number:** \_\_\_\_\_  
(if jointly owned)

**\*Vehicle Owner's Current Mailing Address:** \_\_\_\_\_

(If using a PO Box, where is the vehicle garaged?) \_\_\_\_\_

**\*Owner's Daytime Phone # :** \_\_\_\_\_ **E-mail Address:** \_\_\_\_\_  
(in case we need to ask you a question to complete your registration) (for Commissioner's Office use only, it won't be shared with anyone)

**\*\*If this is a leased vehicle, to whom and where should the tax bill be mailed?\*\*** \_\_\_\_\_  
(leasing company's name)

\_\_\_\_\_  
(leasing company's address)

\_\_\_\_\_  
(leasing company's phone number)

**\*Vehicle Year, Make and Model:** \_\_\_\_\_  
(Please specify what version of that particular model, for example: 2006 Ford Explorer XLS, Sport, Limited or XLT)

**\*Date the vehicle was purchased and/or moved into Falls Church City:** \_\_\_\_\_

**\*What jurisdiction was your vehicle previously garaged (parked) in?** \_\_\_\_\_

**\*Should all of your vehicles be listed as being garaged in "Falls Church City" according to DMV records? Yes? or No? (circle one) (If "No", where should each car be garaged?)**

1. \_\_\_\_\_ garaged in: \_\_\_\_\_ 2. \_\_\_\_\_ garaged in: \_\_\_\_\_

**\*Primary Vehicle Usage:**  
(You must declare one usage to comply with the Virginia State law that amended the Personal Property Tax Relief Act of 1998.)  
**Personal** \_\_\_\_\_ **Business** \_\_\_\_\_ (Is more than 50% of the mileage or depreciation taken as a business expense?)

This status determines if your vehicle qualifies for Personal Property Tax Relief or not. Motor homes, trailers and vehicles over 7501 pounds do not qualify for tax relief.

**\*Signature:** \_\_\_\_\_ **\*Today's Date:** \_\_\_\_\_

Declaration: I declare that the statements and figures herein given are true, full and correct to the best of my knowledge.

**\*Have you recently sold/traded-in/donated/totaled a vehicle registered in Falls Church? Y/N**

**Did you notify the DMV and this office?** Did you transfer the decal to the new vehicle? **If you plan to sell or donate your car in the future**, please notify us: by phone: (703) 248-5065, fax: (703) 248-5212 or by e-mail: [commissioner@fallschurchva.gov](mailto:commissioner@fallschurchva.gov) so the vehicle can be moved out and no longer taxed. If you disposed of a vehicle, provide details on your former vehicle below, so we can update both our COR records & the DMV's:

**Vehicle Year:** \_\_\_\_\_ **Vehicle Make:** \_\_\_\_\_

**Vehicle Model:** \_\_\_\_\_ **Vehicle Disposal Date:** \_\_\_\_\_

Have you contacted the DMV/COR to have the vehicle above given a "disposition date" that will change it from an "active" vehicle to an "inactive" one in your name?

**If you are faxing in a vehicle registration:** include 1. this completed registration form and 2. a legible copy of your DMV vehicle registration card (*an enlarged copy works best*) and a daytime phone number, if we need to call to complete your registration. Did you transfer a decal from one vehicle to another? **Yes or No (please circle)** Do you have a paid current decal from another Virginia jurisdiction? **Yes or No (please circle)** VA jurisdiction: \_\_\_\_\_

*Commissioner's Office Use Only - Complete All Questions/Blanks*

**Customer ID:** \_\_\_\_\_ **PP ID:** \_\_\_\_\_ **Staff initials:** \_\_\_\_\_ **DMV solds/actives printed? Y or N**

**Munis solds/actives printed? Y or N** **Paid decal from what VA jurisdiction?** \_\_\_\_\_ **Decal bill? Y or N**

**Temp. decal given? Y or N** **Fax reg. letter sent? Y or N** **Garage Jurisdiction?** \_\_\_\_\_ **Changed to:** \_\_\_\_\_

**Tom Clinton, Commissioner of Revenue** **Phone:** (703) 248-5023 **Fax:** (703) 248-5212 **E-mail:** [tcClinton@fallschurchva.gov](mailto:tcClinton@fallschurchva.gov)